

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

1444 DUKE STREET

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☒ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2020

through

M M M / D D D / Y Y Y Y Y Y
02 29 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hagan, Timothy, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hagan, Timothy, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 20 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
02 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2020 | | 217236.43 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 274572.10 | |
| (c) Total Receipts (from Line 19) | 187074.79 | 384399.92 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 461646.89 | 601636.35 |
| 7. Total Disbursements (from Line 31) | 155707.59 | 295697.05 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 305939.30 | 305939.30 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 24281.17 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 0 | 1 | | 2 | 0 | 2 | 0 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 2 | 9 | | 2 | 0 | 2 | 0 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|--------------------------------------|--|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 88132.99 | 189670.92 |
| (ii) Unitemized | 82959.80 | 170964.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 171092.79 | 360634.92 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 9500.00 | 11000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 180592.79 | 371634.92 |
| 12. Transfers From Affiliated/Other Party Committees..... | 5182.00 | 5272.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 1300.00 | 7493.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 187074.79 | 384399.92 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 187074.79 | 384399.92 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 154888.59 | 288739.05 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 154888.59 | 288739.05 |
| 22. Transfers to Affiliated/Other Party Committees..... | 365.00 | 365.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 454.00 | 6593.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 454.00 | 6593.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 155707.59 | 295697.05 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 155707.59 | 295697.05 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 180592.79 | 371634.92 |
| 34. Total Contribution Refunds (from Line 28(d)) | 454.00 | 6593.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 180138.79 | 365041.92 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 154888.59 | 288739.05 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 154888.59 | 288739.05 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Aquino, Susan, Lynne, Ms.,

Mailing Address 375 E McFarlane St

City
VenturaState
CAZip Code
93001-1560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smart & Final GroceryOccupation (for Individual)
Cashier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11Al.10118

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Aquino, Susan, Lynne, Ms.,

Mailing Address 375 E McFarlane St

City
VenturaState
CAZip Code
93001-1560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smart & Final GroceryOccupation (for Individual)
Cashier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11Al.10119

Amount of Each Receipt this Period

10.14

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Aquino, Susan, Lynne, Ms.,

Mailing Address 375 E McFarlane St

City
VenturaState
CAZip Code
93001-1560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smart & Final GroceryOccupation (for Individual)
Cashier

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11Al.10120

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

194.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ardeleanu, Sorinne, , ,

Mailing Address 1840 Clay St Apt 301

City

San Francisco

State

CA

Zip Code

94109-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

2020 Presidential Candidate, Healer, A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11Al.10123

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Avent, Michael, , ,

Mailing Address 9175 Ferncliff Ave NE

City

Bainbridge Island

State

WA

Zip Code

98110-1938

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Choate Hall & Stewart LLPOccupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11Al.10151

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barfield, John, Mark, ,

Mailing Address 1456 E Lansdowne Ave

City

Orange City

State

FL

Zip Code

32763-4409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bar None Creative Solutions, LLCOccupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.10232

Amount of Each Receipt this Period

279.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1529.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barfield, Lisa, A., ,

Mailing Address 1456 E Lansdowne Ave

City

Orange City

State

FL

Zip Code

32763-4409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Singhofen & Associates

Occupation (for Individual)

Office Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.10234

Amount of Each Receipt this Period

279.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barksdale, Alan, F., Mr.,

Mailing Address 262 W Lake Cir

City

Madison

State

AL

Zip Code

35758-7921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.10242

Amount of Each Receipt this Period

400.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Harold, Scott, Mr.,

Mailing Address 609 Parnel Rd

City

Old Hickory

State

TN

Zip Code

37138-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

535.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.10324

Amount of Each Receipt this Period

60.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

739.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bilyeu, Whitney, C., ,

Mailing Address 11602 Havard Oaks Dr

City
HoustonState
TXZip Code
77095-3891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.10355

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Biteman, Evan, R., ,

Mailing Address 5521 W County Road 38 E

City
Fort CollinsState
COZip Code
80526-4544FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.10371

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bonoan, Feena, M., ,

Mailing Address 92-149 Kohi Pl

City
KapoleiState
HIZip Code
96707-3303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11Al.10416

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

759.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bonoan, Feena, M., ,

Mailing Address 92-149 Kohi Pl

City
Kapolei

State
HI

Zip Code
96707-3303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.10417

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bowers, Edward, , Mr.,

Mailing Address 6565 Whitman Ave

City
Van Nuys

State
CA

Zip Code
91406-6043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cedars-Sinai Medical Center

Occupation (for Individual)
Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.10439

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bowers, Edward, , Mr.,

Mailing Address 6565 Whitman Ave

City
Van Nuys

State
CA

Zip Code
91406-6043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cedars-Sinai Medical Center

Occupation (for Individual)
Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.10440

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

509.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bray, Neil, , Mr.,

Mailing Address 13279 Tierra Heights Rd

City
Redding

State
CA

Zip Code
96003-7488

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.10472

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brooks, Gary, , ,

Mailing Address 110 E Main St

City

Iron Mountain

State

MI

Zip Code

49801-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Electrician/disabled

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.10496

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Richard, S., ,

Mailing Address 638 Beers Rd

City

Sigel

State

PA

Zip Code

15860-4616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.10517

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Theodore, W., Mr.,

Mailing Address 15401 Ozone Pl

City
AustinState
TXZip Code
78728-3519FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Liberty Bell Claims InsuranceOccupation (for Individual)
Insurance Claims Adjuster

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.10519

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burgess, Lee Ann, , ,

Mailing Address 1313 Brookside Dr

City
NormanState
OKZip Code
73072-6348FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11Al.10552

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Caltagirone, Peter, , Mr.,

Mailing Address 3420 Gibstay Cir

City
AnchorageState
AKZip Code
99516-3557FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
State of Alaska Dept. of Natural ResouOccupation (for Individual)
Senior Legal & Policy Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11Al.10607

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1275.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Charles, Michael, , Mr.,

Mailing Address 33 Golden Star

City
Irvine

State
CA

Zip Code
92604-3035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.10674

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christian, Shane, , ,

Mailing Address 7090 US Highway 82 E

City
Saint Jo

State
TX

Zip Code
76265-1649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
6-4-3 Construction Solutions, LLC

Occupation (for Individual)
COO/CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.10693

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clift, Robert, E., ,

Mailing Address 6402 Hampton Dr

City
Anchorage

State
AK

Zip Code
99504-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retired

Occupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11Al.10723

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Craig, Daniel, A., Dr.,

Mailing Address 872 Fox Valley PI SW

City
Rochester

State
MN

Zip Code
55902-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mayo Clinic

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.10824

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crawford, Cristina, M., Ms.,

Mailing Address PO Box 226

City

Sherborn

State

MA

Zip Code

01770-0226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.10827

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. D'Arcy, Toni, , ,

Mailing Address 42 Colgate Dr

City

Rancho Mirage

State

CA

Zip Code

92270-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.10886

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dagavarian, Dikran, O., Mr.,

Mailing Address 2 Bela View Dr

City
BowState
NHZip Code
03304-4600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.10863

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Danly, James, C., Mr., Jr.

Mailing Address 402 Charlesgate Ct

City

Nashville

State

TN

Zip Code

37215-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Danly International

Occupation (for Individual)

consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.10883

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Daugherty, Dennis, K., ,

Mailing Address PO Box 2512

City

Pueblo

State

CO

Zip Code

81004-0512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Senior Resource Development Agency

Occupation (for Individual)

Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.10892

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Davenport, Daniel, , ,

Mailing Address 1832 Jefferson Dr # 384 Mailbox

City
Atlanta

State
GA

Zip Code
30350-7127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.10894

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davenport, Daniel, , ,

Mailing Address 1832 Jefferson Dr # 384 Mailbox

City
Atlanta

State
GA

Zip Code
30350-7127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.10895

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DiBianca, Arthur, N., Mr.,

Mailing Address 619 Friar Tuck Ln

City
Austin

State
TX

Zip Code
78704-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.10970

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

3500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Driscoll, David, R., ,

Mailing Address 14609 Battery Ridge Ln

City
Centreville

State
VA

Zip Code
20120-2889

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.11016

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Earnheart, Bruce, W., Mr.,

Mailing Address 310 Superior Ave Apt F

City
Dayton

State
OH

Zip Code
45406-5453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aimbridge Hospitality

Occupation (for Individual)
night auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.11062

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eden, Tam, , ,

Mailing Address 249 Kyle Staines Rd

City
Baxley

State
GA

Zip Code
31513-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Roche

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.11085

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2209.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ellett, Emerson, , ,

Mailing Address 1308 Spruce Ave

City
OceanState
NJZip Code
07712-4648FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.11112

Amount of Each Receipt this Period

359.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elliott, Beatrice, , Ms.,

Mailing Address 3771 Reklaw Dr

City
Studio CityState
CAZip Code
91604-3830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

retired born learners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.11115

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eltz, Suzanne, , ,

Mailing Address 822 Summer City Rd

City
PikevilleState
TNZip Code
37367-8412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

356.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.11126

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

884.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Eric, Q., Mr.,

Mailing Address 8304 224th St SW

City
Edmonds

State
WA

Zip Code
98026-8251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bader Martin, P.S.

Occupation (for Individual)
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.11144

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fernandes, Fred, Dan, Mr.,

Mailing Address 2201 Stratford Way

City
La Verne

State
CA

Zip Code
91750-5143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Raytheon

Occupation (for Individual)
Retired Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.11182

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fine, Lawrence, Ari, ,

Mailing Address 407 Chatham Ln

City
Cranberry Township

State
PA

Zip Code
16066-6845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Google

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.11192

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Finkel, Jaclyn, , ,

Mailing Address Attn: Jax - Texas Norml

3571 Far West Blvd # 205

City

Austin

State

TX

Zip Code

78731-3064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CheeseCake Factory

Occupation (for Individual)

Server

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11Al.11194

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Finkenbiner, Eric, , ,

Mailing Address 1916 Pike Pl Ste 12 # 440

City

Seattle

State

WA

Zip Code

98101-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United States Department of State

Occupation (for Individual)

Information Management Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.11197

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fox, Steven, , Mr.,

Mailing Address 25 Cushing Dr

City

Mill Valley

State

CA

Zip Code

94941-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Real Estate Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11Al.11243

Amount of Each Receipt this Period

10000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10650.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garcia, Jose, , ,

Mailing Address 4112 41st St Apt 1E

City
SunnysideState
NYZip Code
11104-3220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.11308

Amount of Each Receipt this Period

179.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garcia, Jose, , ,

Mailing Address 4112 41st St Apt 1E

City
SunnysideState
NYZip Code
11104-3220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.11309

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garland, Andrew, , ,

Mailing Address 253 Tavern Ln

City
StatesboroState
GAZip Code
30458-0163FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

US Xpress

Occupation (for Individual)

Professional Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.11314

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

648.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garland, Andrew, , ,

Mailing Address 253 Tavern Ln

City
Statesboro

State
GA

Zip Code
30458-0163

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

US Xpress

Occupation (for Individual)

Professional Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.11315

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garrard, Robert, David, Mr.,

Mailing Address 2287 N 300th Rd

City
Edgerton

State
KS

Zip Code
66021-4001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Garmin

Occupation (for Individual)

Electronics Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.11321

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Genis, June, R., ,

Mailing Address 2200 W Acacia Ave Apt E329

City
Hemet

State
CA

Zip Code
92545-6756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.11337

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

219.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Geres, Genevieve, , ,

Mailing Address 715 N Main St

City
Manchester

State
CT

Zip Code
06042-1934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ambulance Service of Manchester

Occupation (for Individual)
Paramedic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.11348

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goins, Joseph, L., ,

Mailing Address 382 Cypress Point Dr

City
Lenoir City

State
TN

Zip Code
37772-5051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
CEO Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.11407

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Graft, Thomas, O., ,

Mailing Address 3515 Castle Hill Dr

City
Woodbridge

State
VA

Zip Code
22193-5326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Golden Key Group

Occupation (for Individual)
Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.11445

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

525.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gray, James, P., Judge,

Mailing Address 2531 Crestview Dr

City
Newport Beach

State
CA

Zip Code
92663-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.11461

Amount of Each Receipt this Period

35.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haseloff, Robert, Henry, , Jr.

Mailing Address 4320 Laurie Michelle Rd

City
San Antonio

State
TX

Zip Code
78261-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2540.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.11594

Amount of Each Receipt this Period

20.19

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heise, Michael, , ,

Mailing Address 450 Forrest Ave Apt J206

City
Norristown

State
PA

Zip Code
19401-5664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.11627

Amount of Each Receipt this Period

600.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

655.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hendrix, Penny, C., Ms.,

Mailing Address 12200 FM 389 Rd

City
Burton

State
TX

Zip Code
77835-5097

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Legisym, LLC

Occupation (for Individual)
Software Company Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.11640

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henry, Donald, , ,

Mailing Address 316 SW Washington St Apt 601

City
Peoria

State
IL

Zip Code
61602-4115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USAF

Occupation (for Individual)
Military

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.11643

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hjersman, John, Carl, ,

Mailing Address 2320 Oriole Ave

City
Colorado Springs

State
CO

Zip Code
80909-1964

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11Al.11698

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hunt, Janine, , ,

Mailing Address 333 S 18th St

City
BlairState
NEZip Code
68008-1956FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.11776

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ingraham, Irving, , Dr., Jr.

Mailing Address 115 Federal St

City
SalemState
MAZip Code
01970-3241FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

North Shore Physicians Group

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.11800

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jascob, John, M., Mr.,

Mailing Address PO Box 253

City
TemperanceState
MIZip Code
48182-0253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CCH Incorporated

Occupation (for Individual)

Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.11837

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Matt, , ,

Mailing Address 1420 Via Coronel

City

Palos Verdes Estates

State

CA

Zip Code

90274-1940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.11864

Amount of Each Receipt this Period

5.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kauzlaric, Kevin, , Mr.,

Mailing Address 5814 N Christiana Ave

City

Chicago

State

IL

Zip Code

60659-3502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance

Occupation (for Individual)

Sr. Digital Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.11926

Amount of Each Receipt this Period

379.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kauzlaric, Kevin, , Mr.,

Mailing Address 5814 N Christiana Ave

City

Chicago

State

IL

Zip Code

60659-3502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance

Occupation (for Individual)

Sr. Digital Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.11927

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

394.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kauzlaric, Kevin, , Mr.,

Mailing Address 5814 N Christiana Ave

City
ChicagoState
ILZip Code
60659-3502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate InsuranceOccupation (for Individual)
Sr. Digital Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.11928

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kauzlaric, Kevin, , Mr.,

Mailing Address 5814 N Christiana Ave

City
ChicagoState
ILZip Code
60659-3502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate InsuranceOccupation (for Individual)
Sr. Digital Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.11929

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kauzlaric, Kevin, , Mr.,

Mailing Address 5814 N Christiana Ave

City
ChicagoState
ILZip Code
60659-3502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate InsuranceOccupation (for Individual)
Sr. Digital Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

471.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.11930

Amount of Each Receipt this Period

12.27

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

32.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kendrick, Christine, , ,

Mailing Address 8727 Valleyview Dr

City
Florence

State
KY

Zip Code
41042-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.11952

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kendrick, Christine, , ,

Mailing Address 8727 Valleyview Dr

City
Florence

State
KY

Zip Code
41042-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.11953

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kendrick, Christine, , ,

Mailing Address 8727 Valleyview Dr

City
Florence

State
KY

Zip Code
41042-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

296.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.11954

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kendrick, Christine, , ,

Mailing Address 8727 Valleyview Dr

City
Florence

State
KY

Zip Code
41042-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Homemaker

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.11955

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kissick, Donald, , Mr.,

Mailing Address 113 Eastowne Dr

City
Ottawa

State
OH

Zip Code
45875-8719

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Honda of America Manufacturing

Occupation (for Individual)
Auto Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.12000

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knuth, Christopher, , ,

Mailing Address 675 Ponce De Leon Ave NE Unit E717

City
Atlanta

State
GA

Zip Code
30308-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.12032

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kosiewicz, Edward, L., Mr.,

Mailing Address 3811 38th St W

City
Bradenton

State
FL

Zip Code
34205-1074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.12058

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kraus, Robert, Steven, Prof.,

Mailing Address 205 Yoakum Pkwy Unit 1111

City
Alexandria

State
VA

Zip Code
22304-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LNC

Occupation (for Individual)

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.12066

Amount of Each Receipt this Period

5.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kraus, Robert, Steven, Prof.,

Mailing Address 205 Yoakum Pkwy Unit 1111

City
Alexandria

State
VA

Zip Code
22304-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LNC

Occupation (for Individual)

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

782.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.12067

Amount of Each Receipt this Period

54.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

309.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kraus, Robert, Steven, Prof.,

Mailing Address 205 Yoakum Pkwy Unit 1111

City
Alexandria

State
VA

Zip Code
22304-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LNC

Occupation (for Individual)
Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.12068

Amount of Each Receipt this Period

370.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kunz, Cary, Lee, Mr.,

Mailing Address 7946 Grenezay Rd

City
Wilmington

State
NC

Zip Code
28411-8367

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General Electric

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.12081

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lebovitz, George, , ,

Mailing Address 1649 Pga Blvd

City
Melbourne

State
FL

Zip Code
32935-4456

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

491.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.12162

Amount of Each Receipt this Period

19.71

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

639.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loar, Sonja, B., ,

Mailing Address 38 Paul St

City
Newton Center

State
MA

Zip Code
02459-2451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pro-Unlimited

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.12241

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Longstreth, Richard, , Mr.,

Mailing Address 2195 E 27th Ave

City
Apache Junction

State
AZ

Zip Code
85119-6599

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lowe's Home Improvement

Occupation (for Individual)
Retail Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.12256

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Longstreth, Richard, , Mr.,

Mailing Address 2195 E 27th Ave

City
Apache Junction

State
AZ

Zip Code
85119-6599

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lowe's Home Improvement

Occupation (for Individual)
Retail Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.12257

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

424.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Longstreth, Richard, , Mr.,

Mailing Address 2195 E 27th Ave

City

Apache Junction

State

AZ

Zip Code

85119-6599

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lowe's Home Improvement

Occupation (for Individual)

Retail Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.12258

Amount of Each Receipt this Period

45.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MacKay, Robert, , Mr.,

Mailing Address 2970 Preakness Dr

City

Stow

State

OH

Zip Code

44224-6234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

China Direct Imports, LLC

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.12313

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Malowney, Patricia, , ,

Mailing Address 34 Buckingham St SW

City

Grand Rapids

State

MI

Zip Code

49548-1162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Web Publisher

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.12345

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

570.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marino, David, , ,

Mailing Address 4360 Loma De Luna Dr

City
El PasoState
TXZip Code
79934-3756FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.37

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.12368

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marsh, John, , Mr.,

Mailing Address 4116 Deep Valley Dr

City
DallasState
TXZip Code
75244-7327FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CROSSMARKOccupation (for Individual)
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.12375

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCormick, Kevin, , ,

Mailing Address 5302 E Angela Dr

City
ScottsdaleState
AZZip Code
85254-7523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VMWare

Occupation (for Individual)

Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.12444

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mellon, Charles, D., Mr.,

Mailing Address PO Box 314

City
WestcliffeState
COZip Code
81252-0314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VHAOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.12503

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyer, Ashley, B., ,

Mailing Address 725 Florida St Unit 17

City

San Francisco

State

CA

Zip Code

94110-2054

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.12524

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyer, George, I., ,

Mailing Address 271 Mira Mar Ave

City

Long Beach

State

CA

Zip Code

90803-6127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Irvine CompanyOccupation (for Individual)
Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.12526

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miano, Tristan, , ,

Mailing Address 7011 Sunne Ln Apt 219

City
Walnut Creek

State
CA

Zip Code
94597-3624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mastercard

Occupation (for Individual)

Data Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.12540

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Misteli, Tom, , ,

Mailing Address 652 Harter Rd

City
Dallas

State
TX

Zip Code
75218-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.12587

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Montoni, Marc, , Rabbi,

Mailing Address PO Box 1392

City
Clifton

State
CO

Zip Code
81520-1392

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.12609

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Galen, A., Mr.,

Mailing Address 8899 E Prentice Ave Apt 2307

City

Greenwood Village

State

CO

Zip Code

80111-3352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Data Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11Al.12615

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Moore, Kevin, W., Mr.,

Mailing Address 5323 Balhan Ct Apt B

City

Concord

State

CA

Zip Code

94521-7721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Technology Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11Al.12623

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moore, Kevin, , ,

Mailing Address 8085 Atlas Pear Dr Apt 713

City

Bryan

State

TX

Zip Code

77807-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.12619

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

734.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Kevin, , ,

Mailing Address 8085 Atlas Pear Dr Apt 713

City
BryanState
TXZip Code
77807-1417FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.12620

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Narula, Ankush, , Mr.,

Mailing Address 80 Dekalb Ave Apt 22J

City
BrooklynState
NYZip Code
11201-5467FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.12700

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Neiswinter, Matthew, , Mr.,

Mailing Address 2630 Ben Sanders Rd

City
DalzellState
SCZip Code
29040-9650FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Dollar General

Occupation (for Individual)

Retail Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.12715

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

410.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nekhaila, Steven, , ,

Mailing Address 125 Milano Dr

City
IslamoradaState
FLZip Code
33036-3311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wendy's and Dairy Queen

Occupation (for Individual)

District manager / Franchise owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.12716

Amount of Each Receipt this Period

120.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nelson, Michael, L., Mr.,

Mailing Address 2223 Spacious Skies St

City
RaleighState
NCZip Code
27614-7614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

IBM

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.12720

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Norczyk, Wayne, , ,

Mailing Address 20 Dynasty Dr

City
BearState
DEZip Code
19701-4012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

479.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.12754

Amount of Each Receipt this Period

379.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

514.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Brien, Kate, , Ms.,

Mailing Address 1058 Pacific Ave

City
Simi Valley

State
CA

Zip Code
93065-3132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Civic Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.12779

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ocasek, James, , ,

Mailing Address 116 Alpine Cir

City

Rostraver Township

State

PA

Zip Code

15012-6802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ATLANTIC METHANOL PRODUCTION COMPANY

Occupation (for Individual)

VICE PRESIDENT,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.12782

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Palmer, John, , ,

Mailing Address 15880 W Latham St

City

Goodyear

State

AZ

Zip Code

85338-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Walgreens Boots Alliance

Occupation (for Individual)

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.12850

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

959.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Parker, John, R., ,

Mailing Address 1411 Tanager Trl

City
Saint Marys

State
GA

Zip Code
31558-4107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Concerted Services Inc

Occupation (for Individual)
Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.12864

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Patterson, Michael, K., Dr.,

Mailing Address 811 Summit Lake Shore Rd NW

City
Olympia

State
WA

Zip Code
98502-9483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.12881

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Perez, Otilio, R., , Jr.

Mailing Address 1611 Reeve St

City
Arlington

State
TX

Zip Code
76010-7929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Point Innovation

Occupation (for Individual)
Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

524.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.12917

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Perkins, William, O., Mr., III

Mailing Address 6501 Red Hook Plz # 201

City
St Thomas

State
VI

Zip Code
00802-1373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.12924

Amount of Each Receipt this Period

35500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pettigrew, Scott, C., ,

Mailing Address 6015 Driftwood Ct

City
Maineville

State
OH

Zip Code
45039-7220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SAP America

Occupation (for Individual)
Sr. Integration Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.12961

Amount of Each Receipt this Period

359.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pettigrew, Scott, C., ,

Mailing Address 6015 Driftwood Ct

City
Maineville

State
OH

Zip Code
45039-7220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SAP America

Occupation (for Individual)
Sr. Integration Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.12962

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

35869.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pickerill, John, , , Jr.

Mailing Address 477 S Venango Dr

City
PuebloState
COZip Code
81007-7070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Trane

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.12979

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Porter, Kenna, , ,

Mailing Address 1429 Brighton Cir

City
Old HickoryState
TNZip Code
37138-4645FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.13017

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Porter, Kenna, , ,

Mailing Address 1429 Brighton Cir

City
Old HickoryState
TNZip Code
37138-4645FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.13018

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

628.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Porter, Kenna, , ,

Mailing Address 1429 Brighton Cir

City
Old Hickory

State
TN

Zip Code
37138-4645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.13019

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Porter, Kenna, , ,

Mailing Address 1429 Brighton Cir

City
Old Hickory

State
TN

Zip Code
37138-4645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.13020

Amount of Each Receipt this Period

20.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Porter, Kenna, , ,

Mailing Address 1429 Brighton Cir

City
Old Hickory

State
TN

Zip Code
37138-4645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

368.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.13021

Amount of Each Receipt this Period

10.74

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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40.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Potter, Pamela, E., Ms.,

Mailing Address 538 Spring Place Rd NE

City
White

State
GA

Zip Code
30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.13024

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quinn, Carl, E., Mr.,

Mailing Address 225 Golden Oak Dr

City

Portola Valley

State

CA

Zip Code

94028-7762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Zoos, Inc.

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.13069

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rider, Brian, C., Mr.,

Mailing Address 2906 Hatley Dr

City

Austin

State

TX

Zip Code

78746-4613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney/Law Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.13145

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robb, Samuel, , Mr.,

Mailing Address 1684 Days Run Rd

City
Tarentum

State
PA

Zip Code
15084-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Microsoft

Occupation (for Individual)
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.13163

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robb, Samuel, , Mr.,

Mailing Address 1684 Days Run Rd

City
Tarentum

State
PA

Zip Code
15084-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Microsoft

Occupation (for Individual)
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.13164

Amount of Each Receipt this Period

459.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Robb, Samuel, , Mr.,

Mailing Address 1684 Days Run Rd

City
Tarentum

State
PA

Zip Code
15084-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Microsoft

Occupation (for Individual)
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1484.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.13165

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1484.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robson, Honor, M., ,

Mailing Address 3338 Iroquois Ave

City

Long Beach

State

CA

Zip Code

90808-4103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.13188

Amount of Each Receipt this Period

10.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosander, Karson, Earl, ,

Mailing Address 1146 Howard Ave Apt A

City

Billings

State

MT

Zip Code

59102-5500

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Talen

Occupation (for Individual)

Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.13217

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rutherford, Mark, W., Mr., J.D.

Mailing Address 151 N Delaware St Ste 1900

City

Indianapolis

State

IN

Zip Code

46204-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Thrasher Buschmann Griffith Voelkel

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

983.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.13267

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

760.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ryan, Bette Rose, , ,

Mailing Address 2623 S Iris St

City
Denver

State
CO

Zip Code
80227-2857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.13272

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Bette Rose, , ,

Mailing Address 2623 S Iris St

City
Denver

State
CO

Zip Code
80227-2857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.13273

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ryan, Bette Rose, , ,

Mailing Address 2623 S Iris St

City
Denver

State
CO

Zip Code
80227-2857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.13274

Amount of Each Receipt this Period

216.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

766.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salvette, John, A., Mr.,

Mailing Address 2016 Devonshire Rd

City
Ann Arbor

State
MI

Zip Code
48104-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hayes Lemmerez International

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.13291

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salvette, John, A., Mr.,

Mailing Address 2016 Devonshire Rd

City
Ann Arbor

State
MI

Zip Code
48104-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hayes Lemmerez International

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1115.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.13292

Amount of Each Receipt this Period

15.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Nolan, , Mr.,

Mailing Address 4880 FM 467

City
Seguin

State
TX

Zip Code
78155-0856

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Self-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.13341

Amount of Each Receipt this Period

179.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1194.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Nolan, , Mr.,

Mailing Address 4880 FM 467

City
SeguinState
TXZip Code
78155-0856FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Self-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.13342

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schreiner, Steven, P., ,

Mailing Address 115 S Guadalupe Ave Unit I

City

Redondo Beach

State

CA

Zip Code

90277-3481

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.13362

Amount of Each Receipt this Period

279.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schreiner, Steven, P., ,

Mailing Address 115 S Guadalupe Ave Unit I

City

Redondo Beach

State

CA

Zip Code

90277-3481

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

438.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.13363

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

463.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scott, F. Earl, , , Jr.

Mailing Address PO Box 84258

City
Baton Rouge

State
LA

Zip Code
70884

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Our Lady of the Lake

Occupation (for Individual)
Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.13387

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sedky, Cherif, , ,

Mailing Address 624 SW Saint Lucie Cres Apt 302

City
Stuart

State
FL

Zip Code
34994-2858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Private Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.13400

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shannon, Boomer, , ,

Mailing Address 258 W Hampton Ct

City
Covina

State
CA

Zip Code
91723-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Riverside County

Occupation (for Individual)
Chief of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11Al.13422

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shuford, Robert, F, Mr., Jr

Mailing Address 6 Whartons Way

City
Hampton

State
VA

Zip Code
23669-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Old Point National Bank

Occupation (for Individual)
Banking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.13454

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Daniel, , ,

Mailing Address 10091 Missionary Ridge Rd

City
Bon Aqua

State
TN

Zip Code
37025-1766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smith electrical,heating, cooling and

Occupation (for Individual)
Small business owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11Al.13523

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stevens, Cean, , ,

Mailing Address 317 N Flower St

City
Anchorage

State
AK

Zip Code
99508-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11Al.13632

Amount of Each Receipt this Period

159.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

559.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stevens, Cean, , ,

Mailing Address 317 N Flower St

City
Anchorage

State
AK

Zip Code
99508-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11Al.13633

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stone, Randal, E., ,

Mailing Address 6232 181st Ave SE

City
Sultan

State
WA

Zip Code
98294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Epcon partners

Occupation (for Individual)
QC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11Al.13661

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Supreme, Vermin, , ,

Mailing Address PO Box 2384

City
Rockport

State
MA

Zip Code
01966-3384

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info Requested

Occupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.13699

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

400.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thyret, Russell, , ,

Mailing Address 390 E Glenarm St

City
Pasadena

State
CA

Zip Code
91106-4243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11Al.13814

Amount of Each Receipt this Period

55.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Uluc, Ergun, , ,

Mailing Address 1505 Crystal Dr Apt 1103

City
Arlington

State
VA

Zip Code
22202-4172

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11Al.13883

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Whitney, Ellerton, Pratt Mark, Mr., III

Mailing Address 6540 Lusk Blvd Ste C132

City
San Diego

State
CA

Zip Code
92121-5790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TheLaw.net Corporation

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.14057

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

205.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Whitney, Ellerton, Pratt Mark, Mr., III

Mailing Address 6540 Lusk Blvd Ste C132

City
San Diego

State
CA

Zip Code
92121-5790

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TheLaw.net Corporation

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11Al.14058

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wiest, Christopher, , ,

Mailing Address 25 Parkway Dr

City
Crestview Hills

State
KY

Zip Code
41017-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Chris Wiest Attorney at Law PLLC

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11Al.14068

Amount of Each Receipt this Period

139.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wiest, Christopher, , ,

Mailing Address 25 Parkway Dr

City
Crestview Hills

State
KY

Zip Code
41017-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Chris Wiest Attorney at Law PLLC

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

306.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11Al.14069

Amount of Each Receipt this Period

8.94

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

247.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wolff, Dick, , ,

Mailing Address 1260 Thompson Ave

City
Napa

State
CA

Zip Code
94558-5411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.14137

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wostratzky, Don, , Mr.,

Mailing Address 1S706 Bender Ln

City

West Chicago

State

IL

Zip Code

60185-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.14165

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Yost, Kenneth, , ,

Mailing Address 3005 Thornhill Rd

City

Fayetteville

State

NC

Zip Code

28306-8332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
US Army (Retired)/Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.14193

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zimmerman, Edwin, , ,

Mailing Address 7080 Great Oak Cir

City
BurtonState
TXZip Code
77835-5264FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.14228

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zotz, Douglas, D., Mr.,

Mailing Address 3137 135th Ave NW

City
AndoverState
MNZip Code
55304-3821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Zotz ElectricalOccupation (for Individual)
Electrical Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.14235

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

550.00

TOTAL This Period (last page this line number only)..... ►

88132.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 118

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAM KOKESH AMERICAN REFERENDUM PROJECT

Mailing Address 15223 RIPPLE DR

City
LINDEN

State
MI

Zip Code
48451

FEC ID number of contributing
federal political committee.

C C00662197

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

02 / **21** / **2020**

Transaction ID : SA11C.14591

Amount of Each Receipt this Period

750.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIBERTARIAN PRAGMATIST CAUCUS

Mailing Address 415 W ST NE #A

City

WASHINGTON DC

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00661553

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / **11** / **2020**

Transaction ID : SA11C.14584

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITNEY 2020 INC.

Mailing Address P.O. BOX 928106

City

SAN DIEGO

State

CA

Zip Code

92122

FEC ID number of contributing
federal political committee.

C C00718569

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

02 / **05** / **2020**

Transaction ID : SA11C.14592

Amount of Each Receipt this Period

8500.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9500.00

9500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 118

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIBERTARIAN PARTY OF COLORADO

Mailing Address 11757 W KEN CARYL AVE
F124

City
LITTLETON

State
CO

Zip Code
80127

FEC ID number of contributing
federal political committee.

C C00623397

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA12.14579

Amount of Each Receipt this Period

90.00

☐ Memo Item
Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIBERTARIAN PARTY OF MARYLAND

Mailing Address PO BOX 176

City

ABINGDON

State

MD

Zip Code

21009

FEC ID number of contributing
federal political committee.

C C00618249

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5092.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA12.14580

Amount of Each Receipt this Period

5092.00

☐ Memo Item
Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

5182.00

TOTAL This Period (last page this line number only).....▶

5182.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 118

(check only one)

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Libertarian Party of New Mexico

Mailing Address 8100 Wyoming Blvd

City

Albuquerque

State

NM

Zip Code

87113

FEC ID number of contributing
federal political committee.

C

C00622803

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 12 | | 2020 |

Transaction ID : SA17.14598

Amount of Each Receipt this Period

300.00

☐ Memo Item
 Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Perkins, William, O., Mr., III

Mailing Address 6501 Red Hook Plz # 201

City

St Thomas

State

VI

Zip Code

00802-1373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
entrepreneur

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 28 | | 2020 |

Transaction ID : SA17.12923

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1300.00

TOTAL This Period (last page this line number only).....▶

1300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. A & D Cleaning Service, LLC

Mailing Address 2878 Ft. Scott Dr. #101

City
ArlingtonState
VAZip Code
22202-2347Purpose of Disbursement
Cleaning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14246

Amount of Each Disbursement this Period

247.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Express Merch Services

Mailing Address P.O. Box 1270

City
NewarkState
NJZip Code
07101-1270Purpose of Disbursement
Merch Service Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14248

Amount of Each Disbursement this Period

112.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Audio Visual Group

Mailing Address 82519 Highway 1082

City
BushState
LAZip Code
70431-0000Purpose of Disbursement
Audio Visual Services Convention 2020

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14250

Amount of Each Disbursement this Period

40000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 4 | 0 | 3 | 5 | 9 | . | 9 | 1 |
|---|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
WashingtonState
DCZip Code
20006-0000Purpose of Disbursement
Non Candidate Party Printing and Mailing Serv

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 15 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14252

Amount of Each Disbursement this Period

2756.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Bank Service Charge

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14253

Amount of Each Disbursement this Period

237.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T Loan Processing Center

Mailing Address PO Box 580050

City
CharlotteState
NCZip Code
28258-0050Purpose of Disbursement
Mortgage Payment

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 25 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14254

Amount of Each Disbursement this Period

2900.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5893.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Visa

Mailing Address P.O. BOX 580340

City
CharlotteState
NCZip Code
28258-0340Purpose of Disbursement
Credit Card Payment See Memo

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 28 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

13635.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 7-Eleven, Inc.

Mailing Address P.O. Box 711

City
DallasState
TXZip Code
75221-0711Purpose of Disbursement
Staff Travel-Food

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 05 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

38.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Adobe Systems

Mailing Address 801 N. 324th St.

City
SeattleState
WAZip Code
98103-8882Purpose of Disbursement
Software Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 01 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

52.99

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

13635.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Airbnb, Inc.

Mailing Address 888 Brannan Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 1 | 0 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

2041.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon Cloud Services

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Cloud Web Server

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 3 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

22.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 3 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

463.75

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 80 Massachusetts Ave NE

City
WashingtonState
DCZip Code
20002-0000Purpose of Disbursement
Staff Travel - Train

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 3 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

88.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 536216

City
AtlantaState
GAZip Code
30353-6216Purpose of Disbursement
Wireless WiFi Router

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

67.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T - Branch Banking & Trust

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Credit Card Interest/Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

1.05

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Best Buy Co., Inc.

Mailing Address 7601 Penn Ave South

City
RichfieldState
MNZip Code
55423-0000Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

31.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Best Western International, Inc.

Mailing Address 6201 N. 24th Parkway

City
PhoenixState
AZZip Code
85016-0000Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

228.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Boston Commerce - Your Favorite Inc.

Mailing Address 84 Gainsborough Street

City
BostonState
MAZip Code
02115-6525Purpose of Disbursement
Software Monthly Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

19.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Budget Rent A Car

Mailing Address PO Box 690360

City
TulsaState
OKZip Code
74169-0360Purpose of Disbursement
Staff Travel - Car Rental

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

323.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BWI Airport Parking

Mailing Address c/of BWI Airport Services

City
Glen BurnieState
MDZip Code
21061-0000Purpose of Disbursement
Staff Travel - Parking

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

37.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address PO Box 37601

City
PhiladelphiaState
PAZip Code
19101-0601Purpose of Disbursement
Cable Internet & Telephone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

788.44

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Custom Ink, Inc.

Mailing Address PO BOX 198399

City
AtlantaState
GAZip Code
30384-8399Purpose of Disbursement
LP Political Materials

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

594.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DCA - R. Washington National Airport

Mailing Address 2500 National Avenue

City
WashingtonState
DCZip Code
20001-0000Purpose of Disbursement
Staff Travel - Parking

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30320-0000Purpose of Disbursement
Staff Travel - Air

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

398.80

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dropbox, Inc.

Mailing Address 185 Berry St STE 400

City
San FranciscoState
CAZip Code
94107-0000Purpose of Disbursement
File Sharing Software

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 20 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

19.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Dunkin Donuts

Mailing Address 504 S Van Dorn St # D

City
AlexandriaState
VAZip Code
22304-0000Purpose of Disbursement
Staff Travel - Food

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 01 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

4.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Duracard, Inc.

Mailing Address 8800 Foundry St.

City
SavageState
MDZip Code
20763-9512Purpose of Disbursement
Membership Card Materials

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 20 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

506.02

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Facebook, Inc.

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 1601 S. California Ave

City
Palo AltoState
CAZip Code
94304-0000Purpose of Disbursement
Facebook Ad

004

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

108.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FireFly American Bistro

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 0 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 22 Concord St

City
ManchesterState
NHZip Code
03101-0000Purpose of Disbursement
Staff Travel - Food

002

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

148.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 7001 Tower Road

City
DenverState
COZip Code
80249-7312Purpose of Disbursement
Staff Travel - Air

002

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

511.60

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. GoDaddy.com, Inc.

Mailing Address 14455 N Hayden Rd # 226

City
ScottsdaleState
AZZip Code
85260-6993Purpose of Disbursement
Domain Renewals & Transfers

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

21.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Google, Inc.

Mailing Address 1600 Amphitheatre Prky

City
Mt. ViewState
CAZip Code
94043-1351Purpose of Disbursement
GSuite Hosting Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 3 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

261.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Hilton Hotels Inc.

Mailing Address 9336 Civic Center Drive

City
Beverly HillsState
CAZip Code
90210-0000Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

768.74

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John Companies Collocation

Mailing Address 5482 Complex St #114

City
San DiegoState
CAZip Code
92123-0000Purpose of Disbursement
Mail List Server

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

706.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lexis-Nexis t/a Accurant

Mailing Address P.O. Box 538358

City
AtlantaState
GAZip Code
30353-8358Purpose of Disbursement
Address Phone Verification

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

126.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Pho Pasteur

Mailing Address 710 Rolling Rd

City
CatonsvilleState
MDZip Code
21228-0000Purpose of Disbursement
Staff Travel - Food

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

19.91

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Postmaster - USPS HQ

Mailing Address 475 L'Enfant Plaza SW #4446

City
WashingtonState
DCZip Code
20260-4446Purpose of Disbursement
Postage for Fundraising Letters

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

1321.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorrentos West

Mailing Address 6220 Baltimore National Pike Ste 1

City
CatonsvilleState
MDZip Code
21228-0000Purpose of Disbursement
Staff Travel - Food

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

14.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sparks Nugget Hotel Casino, Inc.

Mailing Address PO Box 797

City
SparksState
NVZip Code
89432-0797Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

2344.09

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Spirit Airlines, Inc.

Mailing Address 2800 Executive Way

City
MiramarState
FLZip Code
33025-0000Purpose of Disbursement
Staff Travel - Air

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

 150.38☒ Memo Item

Full Name (Last, First, Middle Initial)

B. StorQuest

Mailing Address 16980 Cottonwood Drive

City
ParkerState
COZip Code
80134-0000Purpose of Disbursement
Storage Rent

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 2 | 0 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

 305.00☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Twilio, Inc.

Mailing Address 375 Beale Street, Suite 300

City
San FranciscoState
CAZip Code
94105-0000Purpose of Disbursement
Software

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 9 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

 50.00☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

 0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Typeform c/of WPS, Inc.

Mailing Address P.O. Box 81226

City
SeattleState
WAZip Code
98108-1226Purpose of Disbursement
Internet Forms

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies Inc.

Mailing Address 1455 Market St Fl 4

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Staff Travel - Car

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 3 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

31.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 86100

City
ChicagoState
ILZip Code
60666-0100Purpose of Disbursement
Staff Travel - Air

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

467.20

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wufoo.com

Mailing Address 285 Hamilton Avenue Suite 500

City
Palo AltoState
CAZip Code
94301-0000Purpose of Disbursement
On Line Forms

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

181.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Wyndham Worldwide

Mailing Address 7 Sylvan Way

City
ParsippanyState
NJZip Code
07054-0000Purpose of Disbursement
Staff Travel - Hotel

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

193.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Zoom Video Communications, Inc.

Mailing Address 55 Almaden Boulevard, 6th Floor

City
San JoseState
CAZip Code
95113-0000Purpose of Disbursement
Video Conference Sevices

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 3 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14255

Amount of Each Disbursement this Period

40.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Visa

Mailing Address P.O. BOX 580340

City
CharlotteState
NCZip Code
28258-0340Purpose of Disbursement
Credit Card Payment See Memo

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 2 | 9 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14321

Amount of Each Disbursement this Period

4579.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sparks Nugget Hotel Casino, Inc.

Mailing Address PO Box 797

City
SparksState
NVZip Code
89432-0797Purpose of Disbursement
Staff Travel - Food

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 1 | 2 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14321

Amount of Each Disbursement this Period

4579.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Bigeye Direct, Inc.

Mailing Address PO Box 710865

City
Oak HillState
VAZip Code
20171-0865Purpose of Disbursement
Non Candidate Party Printing and Mailing Serv

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 1 | 5 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14321

Amount of Each Disbursement this Period

1844.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6423.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Blackbaud, Inc.

Mailing Address P.O. Box 930256

City
AtlantaState
GAZip Code
31193-0256Purpose of Disbursement
Credit Card Processing Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 2 | 9 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14324

Amount of Each Disbursement this Period

1400.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Affiliate Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 6 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14550

Amount of Each Disbursement this Period

4009.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Reimbursement (See Memo Text)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 6 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14551

Amount of Each Disbursement this Period

47.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5457.50

TOTAL This Period (last page this line number only)..... ►

: 97 `A=G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.14551

Brainstorm - Astra Theme2035 Sunset Lk Rd #B-2 Newark, DE 19702-0000Website Plug In 2/6/2020 \$47.20

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Affiliate Support Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14326

Amount of Each Disbursement this Period

2160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Burns, Andrew, , ,

Mailing Address 2790 Xerxes Ave S Apt 3

City
MinneapolisState
MNZip Code
55416-0000Purpose of Disbursement
Reimbursed Expenses - See Memo

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14330

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IThemes Media

Mailing Address 1720 S Kelly Ave

City
EdmondState
OKZip Code
73013-0000Purpose of Disbursement
Website Plug In

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14331

Amount of Each Disbursement this Period

150.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2310.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. CareFirst BlueChoice, Inc.

Mailing Address PO Box 79749

City
BaltimoreState
MDZip Code
21279-0749Purpose of Disbursement
Employee health and Dental

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 01 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14333

Amount of Each Disbursement this Period

1654.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Clarke, Robert, , ,

Mailing Address 903 Meadowcreek Rd.

City
Chester SpringsState
PAZip Code
19425-0000Purpose of Disbursement
Social Media Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 28 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14333

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Congdon, Rebekah, , ,

Mailing Address 7113 Avery Rd

City
Live OakState
TXZip Code
78233-5465Purpose of Disbursement
Admin Support

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 06 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14333

Amount of Each Disbursement this Period

1600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3754.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Congdon, Rebekah, , ,

Mailing Address 7113 Avery Rd

City
Live OakState
TXZip Code
78233-5465Purpose of Disbursement
Admin Support

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14337

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Davis, Jeremy, , ,

Mailing Address 87 W 6480 S

City
Salt Lake CityState
UTZip Code
84107-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 15 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14339

Amount of Each Disbursement this Period

950.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Davis, Jeremy, , ,

Mailing Address 87 W 6480 S

City
Salt Lake CityState
UTZip Code
84107-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14340

Amount of Each Disbursement this Period

950.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3700.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Administrative Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14552**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Reiumberssed Expenses See Memo Text

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14553**

Amount of Each Disbursement this Period

773.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Admin Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14342**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7773.40

: 97 `A=~~G~~79 @~~C~~~~C~~ B9CI G`H9LH`F9 @~~C~~ H98 `HC`5 `F9DCFHZG7 <98I @~~C~~ `CF`~~H~~9A=~~N~~5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.14553

United AirlinesPO Box 86100 Chicago IL 60666-0100Travel-Air 2/4/2020 \$773.40

Form/Schedule:
Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Reimbursed Expense - Uber - See Memo

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14346

Amount of Each Disbursement this Period

75.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Travel - Car

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

002

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14346

Amount of Each Disbursement this Period

75.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DeSisto, Tara, , ,

Mailing Address 351 Linwood Ave

City
NewtonvilleState
MAZip Code
02460-1342Purpose of Disbursement
Admin Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14346

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3575.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dominion Virginia Power

Mailing Address PO Box 26543

City
RichmondState
VAZip Code
23290-0001Purpose of Disbursement
Electric

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 1 | 0 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14347

Amount of Each Disbursement this Period

422.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dunbar, Dominick, , ,

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 0 | 5 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14348

Amount of Each Disbursement this Period

174.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dunbar, Dominick, , ,

Mailing Address 75 Aquia Creek Rd

City
StaffordState
VAZip Code
22554-5528Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | | 1 | 9 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14348

Amount of Each Disbursement this Period

84.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

681.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14350

Amount of Each Disbursement this Period

38.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14351

Amount of Each Disbursement this Period

1519.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14352

Amount of Each Disbursement this Period

190.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1748.10

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14353

Amount of Each Disbursement this Period

190.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14354

Amount of Each Disbursement this Period

813.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14355

Amount of Each Disbursement this Period

813.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1816.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14356

Amount of Each Disbursement this Period

16.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14357

Amount of Each Disbursement this Period

1423.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14358

Amount of Each Disbursement this Period

181.44

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1621.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14359

Amount of Each Disbursement this Period

181.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14360

Amount of Each Disbursement this Period

775.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14361

Amount of Each Disbursement this Period

775.84

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1733.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Fishman, Daniel, 84871931, ,

Mailing Address 1270 Old Landing Rd

City
AccokeekState
MDZip Code
20607-3514Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 05 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14362**

Amount of Each Disbursement this Period

3359.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fishman, Daniel, 84871931, ,

Mailing Address 1270 Old Landing Rd

City
AccokeekState
MDZip Code
20607-3514Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14363**

Amount of Each Disbursement this Period

3090.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FP Mailing Solutions

Mailing Address PO Box 157

City
Bedford ParkState
ILZip Code
60499-0157Purpose of Disbursement
Postage & Meter Resets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2020 |

FEC Identification Number

C**Transaction ID : SB21B.14364**

Amount of Each Disbursement this Period

1800.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8249.89

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Harris, Tyler, , ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14365

Amount of Each Disbursement this Period

964.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris, Tyler, , ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14366

Amount of Each Disbursement this Period

974.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris, Tyler, , ,

Mailing Address 6954 Gillis Way

City
GainesvilleState
VAZip Code
20155-1697Purpose of Disbursement
Reimbursed Exp see Memo

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14367

Amount of Each Disbursement this Period

64.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2003.68

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wal-Mart Stores, Inc.

Mailing Address 702 Southwest Eighth Street

City
BentonvilleState
ARZip Code
72716-8611Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14367

Amount of Each Disbursement this Period

64.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Johnston, Robert, S., Mr., III

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633Purpose of Disbursement
Contract Labor Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14539

Amount of Each Disbursement this Period

2160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Johnston, Robert, , ,

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633Purpose of Disbursement
Contract labor admin services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14374

Amount of Each Disbursement this Period

2160.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4320.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 95 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kraus, Robert, Steven, Prof.,

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 205 Yoakum Pkwy Unit 1111

City
AlexandriaState
VAZip Code
22304-3857Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.14375

Amount of Each Disbursement this Period

1651.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kraus, Robert, Steven, Prof.,

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 205 Yoakum Pkwy Unit 1111

City
AlexandriaState
VAZip Code
22304-3857Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.14376

Amount of Each Disbursement this Period

1651.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Liberty-Libre-Liberte LLC

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

Mailing Address 186 Newton St

City
ManchesterState
GAZip Code
31816-0000Purpose of Disbursement
Video Editing Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.14377

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5803.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Liberty-Libre-Liberte LLC

Mailing Address 186 Newton St

City
ManchesterState
GAZip Code
31816-0000Purpose of Disbursement
Video Editing Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14378

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Maryland Revenue Administration

Mailing Address PO Box 1829

City
AnnapolisState
MDZip Code
21404-1829Purpose of Disbursement
MD - Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14379

Amount of Each Disbursement this Period

204.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Maryland Revenue Administration

Mailing Address PO Box 1829

City
AnnapolisState
MDZip Code
21404-1829Purpose of Disbursement
MD - Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14380

Amount of Each Disbursement this Period

184.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1889.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Master Print, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

003

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14381

Amount of Each Disbursement this Period

418.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Master Print, Inc.

Mailing Address PO Box 1467

City
NewingtonState
VAZip Code
22122-1467Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

003

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14382

Amount of Each Disbursement this Period

585.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mears, Jessica, , ,Mailing Address 1600 Prince St
Apt 104City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14383

Amount of Each Disbursement this Period

1732.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2736.58

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mears, Jessica, , ,

Mailing Address 1600 Prince St
Apt 104

City
Alexandria

State
VA

Zip Code
22314-0000

Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

FEC Identification Number

C

Transaction ID : SB21B.14384

Amount of Each Disbursement this Period

1732.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 890 Mountain Ave

City
New Providence

State
NJ

Zip Code
07974-0000

Purpose of Disbursement
Merch Processing Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

FEC Identification Number

C

Transaction ID : SB21B.14385

Amount of Each Disbursement this Period

1240.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mulvena, Kenneth, , ,

Mailing Address 253-14 85th Road

City
Bellerose

State
NY

Zip Code
11426-0000

Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 15 / 2020

FEC Identification Number

C

Transaction ID : SB21B.14388

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3973.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mulvena, Kenneth, , ,

Mailing Address 253-14 85th Road

City
BelleroseState
NYZip Code
11426-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14389

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Omega Oak - Buffalo Rock

Mailing Address 24524 Playhouse Road

City
KeystoneState
SDZip Code
57751-0000Purpose of Disbursement
Administrative Support Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14540

Amount of Each Disbursement this Period

1199.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Omega Oak - Buffalo Rock

Mailing Address 24524 Playhouse Road

City
KeystoneState
SDZip Code
57751-0000Purpose of Disbursement
Administrative Support Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14391

Amount of Each Disbursement this Period

1589.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3788.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 118

| | | | | |
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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Oquirrh Mountain Strategies, LLC

Mailing Address 8831 W State Highway

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Candidate Recruitment & Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 04 | / | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14541

Amount of Each Disbursement this Period

1903.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Oquirrh Mountain Strategies, LLC

Mailing Address 8831 W State Highway

City
CoppertonState
UTZip Code
84006-0000Purpose of Disbursement
Candidate Recruitment & Support Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 15 | / | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14393

Amount of Each Disbursement this Period

1903.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merch Processing Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 29 | / | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14394

Amount of Each Disbursement this Period

1968.62

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5776.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Presutti, Mario, , ,

Mailing Address 980 Elm Street

City
OviedoState
FLZip Code
32765-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14397

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Presutti, Mario, , ,

Mailing Address 980 Elm Street

City
OviedoState
FLZip Code
32765-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14398

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14399

Amount of Each Disbursement this Period

138.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2138.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14400

Amount of Each Disbursement this Period

19.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Round House Sq UOA

Mailing Address 6231 Leesburg Pk #100

City
Falls ChurchState
VAZip Code
22044-0000Purpose of Disbursement
Association Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 1 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14401

Amount of Each Disbursement this Period

215.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sarwark, Nicholas, , ,

Mailing Address 2309 E Virginia Ave

City
PhoenixState
AZZip Code
85006-1329Purpose of Disbursement
Travel Expense Reimbursement see Memo

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14403

Amount of Each Disbursement this Period

736.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

971.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36662

City
DallasState
TXZip Code
75235-6682Purpose of Disbursement
Travel - Air

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14403

Amount of Each Disbursement this Period

736.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 510 Townsend Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Merch Processing Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14409

Amount of Each Disbursement this Period

664.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thexton, Matthew, , ,

Mailing Address 7219 Gordons Rd

City
Falls ChurchState
VAZip Code
22043-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14411

Amount of Each Disbursement this Period

1066.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 7 | 3 | 0 | . | 7 | 7 |
|---|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thexton, Matthew, , ,

Mailing Address 7219 Gordons Rd

City
Falls ChurchState
VAZip Code
22043-0000Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 9 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14411

Amount of Each Disbursement this Period

1013.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ussery, Katie, , ,

Mailing Address 3203 70th St

City
UrbandaleState
IAZip Code
50322-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 5 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14411

Amount of Each Disbursement this Period

1050.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ussery, Katie, , ,

Mailing Address 3203 70th St

City
UrbandaleState
IAZip Code
50322-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 2 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14411

Amount of Each Disbursement this Period

1050.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3113.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ussery, Katie, , ,

Mailing Address 3203 70th St

City
UrbandaleState
IAZip Code
50322-0000Purpose of Disbursement
LPMD Ballot Access Petitioning

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14416

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ussery, Katie, , ,

Mailing Address 3203 70th St

City
UrbandaleState
IAZip Code
50322-0000Purpose of Disbursement
Reimbursed Exp see memo

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14417

Amount of Each Disbursement this Period

98.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 86100

City
ChicagoState
ILZip Code
60666-0100Purpose of Disbursement
Travel - Air

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14417

Amount of Each Disbursement this Period

98.98

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

348.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401k Contributions & Co. Match

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 05 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14419

Amount of Each Disbursement this Period

1327.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401K Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 06 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14542

Amount of Each Disbursement this Period

804.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401k Contributions & Co. Match

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14421

Amount of Each Disbursement this Period

1274.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3406.37

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14423

Amount of Each Disbursement this Period

18.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 04 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14424

Amount of Each Disbursement this Period

499.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 18 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14425

Amount of Each Disbursement this Period

9.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

526.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 8 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14426

Amount of Each Disbursement this Period

496.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Windstream - Broadview

Mailing Address P.O. Box 70268

City
PhiladelphiaState
PAZip Code
19176-0268Purpose of Disbursement
Phone system & usage

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 1 | 4 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14430

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Woods, Thomas, , ,

Mailing Address 7125 Indian Grass Rd

City
HarmonyState
IDZip Code
34773-0000Purpose of Disbursement
New Donor Prospecting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 2 | | | 0 | 6 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C

Transaction ID : SB21B.14543

Amount of Each Disbursement this Period

827.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2823.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 118

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Worldwide Express

Mailing Address PO Box 21272

City
NewYorkState
NYZip Code
10087-1272Purpose of Disbursement
Shipping

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y Y Y |
| 02 | | 15 | | 2020 |

FEC Identification Number

C

Transaction ID : SB21B.14433

Amount of Each Disbursement this Period

398.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y Y Y |
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

398.75

154480.24

| | | | | | | | | | |
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| | 21b | x | 22 | | 23 | | 26 | | 27 |
| | 28a | | 28b | | 28c | | 29 | | 30b |

LIBERTARIAN NATIONAL COMMITTEE, INC.

Memo Item

365.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB22

Transaction ID : SB22.14485

Paid via BBT VISA 2/28/2020

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 118

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|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Morris, Carole-Anne, , ,

Mailing Address 114 Pebble Lane

City
ClintonState
MSZip Code
39506-5814Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

010

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 05 | | 2020 |

FEC Identification Number

C

Transaction ID : SB28A.14586

Amount of Each Disbursement this Period

429.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

429.00

429.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 113 OF 118

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

B & B Duplicators

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address 818 18th Street NW LL15

City

Washington

State

DC

Zip Code

20006-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14562

Amount Incurred This Period

1759.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

1759.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burns, Andrew, , ,

Nature of Debt (Purpose):

Affiliate Support Services

Mailing Address 2790 Xerxes Ave S Apt 3

City

Minneapolis

State

MN

Zip Code

55416-0000

Outstanding Balance Beginning This Period

4056.70

Transaction ID : SD10.9968

Amount Incurred This Period

0.00

Payment This Period

4056.70

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Congdon, Rebekah, , ,

Nature of Debt (Purpose):

Administrative Support

Mailing Address 7113 Avery Rd

City

Live Oak

State

TX

Zip Code

78233-5465

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14563

Amount Incurred This Period

1725.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1725.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3484.85

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 114 OF 118

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DeSisto, Tara, , ,

Nature of Debt (Purpose):

Adminstrative Support

Mailing Address 351 Linwood Ave

City

Newtonville

State

MA

Zip Code

02460-1342

Outstanding Balance Beginning This Period

4273.40

Transaction ID : SD10.9969

Amount Incurred This Period

0.00

Payment This Period

4273.40

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hall, Oliver, , ,

Nature of Debt (Purpose):

Legal Retainer

Mailing Address 1835 16th St NW #5

City

Washington

State

DC

Zip Code

20009-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14564

Amount Incurred This Period

6831.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

6831.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Labor Admin Services

Mailing Address PO Box 1633

City

Bel Air

State

MD

Zip Code

21014-7633

Outstanding Balance Beginning This Period

2160.00

Transaction ID : SD10.9970

Amount Incurred This Period

0.00

Payment This Period

2160.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6831.60

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 115 OF 118

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Labor Admin Services

Mailing Address PO Box 1633

City

Bel Air

State

MD

Zip Code

21014-7633

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14574

Amount Incurred This Period

1944.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1944.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Omega Oak - Buffalo Rock

Nature of Debt (Purpose):

Administrative Support Services

Mailing Address 24524 Playhouse Road

City

Keystone

State

SD

Zip Code

57751-0000

Outstanding Balance Beginning This Period

1199.00

Transaction ID : SD10.9971

Amount Incurred This Period

0.00

Payment This Period

1199.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Omega Oak - Buffalo Rock

Nature of Debt (Purpose):

Administrative Support Services

Mailing Address 24524 Playhouse Road

City

Keystone

State

SD

Zip Code

57751-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14567

Amount Incurred This Period

691.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

691.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2635.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 116 OF 118

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oquirrh Mountain Strategies, LLC

Nature of Debt (Purpose):

Candidate Recruitment & Support Services

Mailing Address 8831 W State Highway

City

Copperton

State

UT

Zip Code

84006-0000

Outstanding Balance Beginning This Period

1903.80

Transaction ID : SD10.9972

Amount Incurred This Period

0.00

Payment This Period

1903.80

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oquirrh Mountain Strategies, LLC

Nature of Debt (Purpose):

Candidate Recruitment & Support Services

Mailing Address 8831 W State Highway

City

Copperton

State

UT

Zip Code

84006-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14568

Amount Incurred This Period

1903.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

1903.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stigler Printing

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address Box 549 - 204 S. Broadway

City

Stigler

State

OK

Zip Code

74462

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14571

Amount Incurred This Period

7918.16

Payment This Period

0.00

Outstanding Balance at Close of This Period

7918.16

1) SUBTOTALS This Period This Page (optional)..... ►

9821.96

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 117 OF 118

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stigler Printing

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address Box 549 - 204 S. Broadway

City
StiglerState
OKZip Code
74462

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14572

Amount Incurred This Period

240.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

240.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stigler Printing

Nature of Debt (Purpose):

Non Candidate Party Printing Services

Mailing Address Box 549 - 204 S. Broadway

City
StiglerState
OKZip Code
74462

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.14569

Amount Incurred This Period

1267.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

1267.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Vanguard - Ascensus

Nature of Debt (Purpose):

LP 401K Fees

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067

Outstanding Balance Beginning This Period

804.24

Transaction ID : SD10.9973

Amount Incurred This Period

0.00

Payment This Period

804.24

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1507.76

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Woods, Thomas, , ,

Nature of Debt (Purpose):

New Donor Prospecting

Mailing Address 7125 Indian Grass Rd

City
HarmonyState
IDZip Code
34773-0000

Outstanding Balance Beginning This Period

827.00

Transaction ID : SD10.9974

Amount Incurred This Period

0.00

Payment This Period

827.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

24281.17

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

24281.17